

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>6/14/05</u>		2 Serial/Patent # <u>10/521743</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ <u>100.00</u>
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:	
<input type="checkbox"/>	Duplicate Payment		9 <u>22--0185</u>	
<input type="checkbox"/>	No Fee Due (Explanation):			
<u>Fee Code Correction</u>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>BAC</u>		TITLE: _____		
SIGNATURE: <u>[Signature]</u>		PHONE: _____		
OFFICE: <u>PCT/DO/EOP</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: _____		DATE: _____		

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*